

## **DOCUMENTATION CHECKLIST FOR GLUCOSE MONITORS AND RELATED SUPPLIES**

### **Policy References:**

- [Local Coverage Determination \(L33822\)](#)
- [Policy Article \(A52464\)](#)

**Documentation References:** [Standard Documentation Requirements Policy Article \(A55426\)](#)

The supplier must be able to provide all of these items on request:

[Standard Written Order \(SWO\)](#)

[Beneficiary Authorization](#)

[Proof of Delivery \(POD\)](#)

[Continued Need](#)

[Continued Use](#)

[Glucose Meter on File](#)

Medical records from treating practitioner as noted below

### **Medical records should contain:**

### **Basic Coverage Criteria**

Criterion 1: Beneficiary has diabetes; **and**

Criterion 2: Physician has concluded beneficiary/caregiver has sufficient training using the device as evidenced by prescribing the appropriate supplies and frequency of testing.

### **Usual Utilization**

Not treated with insulin injections, up to 100 test strips and 100 lancets every three months are covered if basic criteria above are met.

Treated with insulin injections, up to 300 test strips and 300 lancets every three months are covered if basic criteria above are met.

### **High Utilization (Billing Over Usual Utilization)**

Basic coverage criteria are met; **and**

Physician has seen and evaluated the beneficiary's diabetes within six months of ordering quantities of supplies above the normal utilization and has documented the specific reason for the additional supplies; **and**

Medical records document the frequency of actual testing by the beneficiary.

Specific narrative that documents the frequency the beneficiary is actually testing; **or**

Copy of the beneficiary's log.

New documentation must be present every six months if the beneficiary is regularly using quantities of supplies that exceed utilization guidelines.

## **Glucose Monitors with Special Features – E2100 and E2101**

### Visual Impairment

Basic coverage criteria are met; **and**

Treating physician certifies that the beneficiary has a severe visual impairment.

### Manual Impairment

Basic coverage criteria are met; **and**

Treating physician certifies that the beneficiary has an impairment of manual dexterity severe enough to require the use of this special monitoring system.